

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:

GEORGE KIRSCHBAUM
PAMELA S KIRSCHBAUM
Debtor(s)

Case No. 05-51285

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Glenn Stearns, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 10/13/2005.
- 2) The plan was confirmed on 02/09/2006.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was completed on 04/22/2009.
- 6) Number of months from filing to last payment: 42.
- 7) Number of months case was pending: 53.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$35,600.00.
- 10) Amount of unsecured claims discharged without payment: \$39,221.94.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$33,715.00
Less amount refunded to debtor	\$535.00

NET RECEIPTS: **\$33,180.00**

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$1,800.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$1,492.08
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION: **\$3,292.08**

Attorney fees paid and disclosed by debtor: \$900.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ADVENTIST HEALTH SYSTEM	Unsecured	150.00	NA	NA	0.00	0.00
AMERICAN GENERAL FINANCE	Unsecured	NA	398.79	398.79	78.43	0.00
AMERICAN GENERAL FINANCE	Secured	9,701.00	7,125.00	7,125.00	7,125.00	525.88
AMERICREDIT FINANCIAL	Secured	9,000.00	9,000.00	9,000.00	9,000.00	4,319.02
AMERICREDIT FINANCIAL	Unsecured	NA	2,499.74	2,499.74	491.60	0.00
ARGONNE CREDIT UNION	Unsecured	503.00	NA	NA	0.00	0.00
ASPIRE VISA	Unsecured	484.00	644.87	644.87	126.82	0.00
ASSET ACCEPTANCE CORP	Unsecured	242.00	229.71	229.71	45.17	0.00
ASSOCIATES FOR ORAL & MAX SURG	Unsecured	100.00	NA	NA	0.00	0.00
AT&T	Unsecured	184.00	NA	NA	0.00	0.00
BECKET & LEE LLP	Unsecured	3,309.00	3,309.34	3,309.34	650.81	0.00
CAPITAL ONE BANK	Unsecured	827.00	745.11	745.11	146.53	0.00
CITY OF JOLIET	Secured	152.00	152.00	152.00	152.00	12.05
CITY OF JOLIET	Unsecured	600.00	NA	NA	0.00	0.00
COMED LEGAL REVENUE RECOVERY	Unsecured	639.00	NA	NA	0.00	0.00
COUNTRYWIDE HOME LOANS	Secured	NA	NA	NA	0.00	0.00
COUNTRYWIDE HOME LOANS	Secured	2,900.00	2,998.54	2,998.54	2,998.54	0.00
CREDITORS COLLECTION BUREAU	Unsecured	NA	1,193.80	1,193.80	234.77	0.00
DRS BOYER & SCHEIVE	Unsecured	110.20	NA	NA	0.00	0.00
DUPAGE MEDICAL GROUP	Unsecured	15.00	NA	NA	0.00	0.00
DUPAGE PATHOLOGY ASSOC	Unsecured	26.00	NA	NA	0.00	0.00
ECAST SETTLEMENT CORPORATION	Unsecured	223.00	343.72	343.72	67.60	0.00
ECAST SETTLEMENT CORPORATION	Unsecured	3,312.00	4,696.41	4,696.41	923.60	0.00
EVANSTON NW HEALTHCARE	Unsecured	1,231.96	NA	NA	0.00	0.00
FISCHER MANGOLD	Unsecured	142.34	NA	NA	0.00	0.00
HSBC	Secured	1,646.00	1,646.00	1,646.00	1,646.00	0.00
HSBC	Secured	NA	NA	NA	0.00	0.00
JAGUAR CREDIT CORP	Unsecured	NA	NA	NA	0.00	0.00
JOLIET RADIOLOGICAL SERVICE	Unsecured	1,495.00	539.70	539.70	106.14	0.00
KURTZ AMBULANCE SERVICE	Unsecured	1,005.30	NA	NA	0.00	0.00
LAKEWOOD AT CATON FARM	Secured	800.00	800.00	800.00	800.00	65.69

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
LOYOLA UNIV MEDICAL CENTER	Unsecured	3,331.89	NA	NA	0.00	0.00
MARSHALL FIELD	Unsecured	205.00	187.40	187.40	36.85	0.00
MEDICAL PAYMENT CTR	Unsecured	1,005.00	NA	NA	0.00	0.00
MIDWEST PEDIATRIC	Unsecured	15.00	NA	NA	0.00	0.00
MOHAWK COLOR CTR	Unsecured	4,390.00	NA	NA	0.00	0.00
NICOR GAS	Unsecured	328.00	339.07	339.07	66.68	0.00
PAIN CARE CONSULTANTS	Unsecured	2,337.00	NA	NA	0.00	0.00
PRAIRIE EMERGENCY SERVICE	Unsecured	16.00	525.00	525.00	103.25	0.00
PREMIER BANKCARD/CHARTER	Unsecured	367.00	481.51	481.51	94.69	0.00
PROFESSIONAL COLLECTION SVC	Unsecured	60.00	60.00	60.00	11.80	0.00
PROVENA ST JOSEPH MEDICAL CTR	Unsecured	2,220.00	NA	NA	0.00	0.00
SILVER CROSS HOSPITAL	Unsecured	225.00	NA	NA	0.00	0.00
SOUTHWEST SURGICAL ASSTS	Unsecured	1,330.00	NA	NA	0.00	0.00
ST JOSEPH HOSPITAL	Unsecured	1,756.97	NA	NA	0.00	0.00
U OF I DEPT OF PATHOLOGY	Unsecured	91.67	300.00	300.00	59.00	0.00
VALLEY IMAGING CONSULTANTS	Unsecured	335.85	NA	NA	0.00	0.00
WARYJAS MD	Unsecured	4,000.00	NA	NA	0.00	0.00
WILL COUNTY HEALTH DEPT	Unsecured	12.00	NA	NA	0.00	0.00
ZLATKO AVERIC MD	Unsecured	306.00	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:

	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Interest Paid</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$4,644.54	\$4,644.54	\$0.00
Debt Secured by Vehicle	\$16,125.00	\$16,125.00	\$4,844.90
All Other Secured	\$952.00	\$952.00	\$77.74
TOTAL SECURED:	\$21,721.54	\$21,721.54	\$4,922.64
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$16,494.17	\$3,243.74	\$0.00

Disbursements:

Expenses of Administration	<u>\$3,292.08</u>	
Disbursements to Creditors	<u>\$29,887.92</u>	
TOTAL DISBURSEMENTS :		<u>\$33,180.00</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 03/10/2010

By: /s/ Glenn Stearns

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.